Plea	print or type esigned for use on efite (12-pitch) typewriter)								
-	NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Pag	e 1				
A	Generator's Name and Mailing Address Douglas Arrorat Co., Co., was some ease.			Í ÝC, NT	i žvaz trian	Heed is	784.01	0007	
	3855 Lakewood Blvd. Long Beach. CA 98865 4. Generator's Phone (587.4)8-4874 After March. Saltipari			* HAEF36005698					
	5. Transporter 1 Company Name Ecology Cartrol transition	6. US EPA ID Number							
	7. Transporter 2 Company Name 8. US EPA ID Number Company Name 10. A D D D D D D D D D D D D D D D D D D			B. Transporter's Phone					
	9. Designated Facility Name and Site Address 10. US EPA ID Number C. Facility's Phone								
	2005 Newlands Drive East								
	11. Waste Shipping Name and Description				12. Cont No.	Type	13. Total Quantity	14: Unit Wt/Vol	
	d. Referres dry continuent potensium hydroxide sould 8 CMSIDS PCIII					rna è	aaaaa		
G	b. (2004)			# %			0001.0	***	
E N E	Exalterary was tilled with allical to b	1942 (Sep. 1964)		A.	001	OM	100050		
R A T O	c.								
R	d.				.%				
- 746									
	D. Additional Descriptions for Materials Listed Above E. Handling Codes for Wastes Listed Above 113. Profile manufact 158334 Balteries. Alkaline								
	11b Profile aumber 1903.14 Besteries F	BCAC .							
	15. Special Handling Instructions and Additional Information 24 Hour Envergency Telephone Number (800) 424–9300 (Chemitree)								
	Site Address 19503 Seigh Normand								
		×						1/2	
V	16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste. Printed/Typed Name Signature Month Day Year								
I	17. Transporter 1 Acknowledgement of Receipt	[C C 1 - T 1 7 .]							
AZSP	Printed/Typed Name 8. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Signature				Month Day Year				
TRANSPORTER					Month Day Year				
<u>R</u>	19. Discrepancy Indication Space								
F A C				ų.					
L	20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 19.								
Y	Printed/Typed Name	Signature		49			Month Day	Year	
	med by J. J. KELLER & ASSOCIATES, INC.	COPY					12-BL	C-M6	